

## Coming Changes for Adults Who Have Medicare and Medi-Cal

### California Coordinated Care Initiative and the Cal MediConnect Program

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## Coming Changes for People with Medicare and Medi-Cal

### California Coordinated Care Initiative

#### Target populations

- Adults who have Medicare and Medi-Cal
- Adults who are Medi-Cal only

#### Geographic area

- 8 California counties, including Los Angeles County

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## California Coordinated Care Initiative (CCI)

### Key components –

- **“Cal MediConnect” Demonstration Project:** Persons with Medicare and Medi-Cal (dual eligibles) will be encouraged to enroll into Cal MediConnect Plans that will integrate their Medicare and Medi-Cal benefits
- **Mandatory Medi-Cal managed care:** Dual eligibles who opt out of Cal MediConnect will be required to enroll into Medi-Cal health plans
- **Integration of “carved out” Medi-Cal benefits**

ALL MEDI-CAL SERVICES ARE AVAILABLE ONLY AS  
MEDI-CAL MANAGED CARE BENEFITS

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## Cal MediConnect

### Who is Eligible for Cal MediConnect

- Live in one of the 8 Demonstration counties
- Age 21 or older
- Have Medicare Parts A and B
- Have full Medi-Cal or
- Have Medi-Cal with a Share of Cost and receive MSSP or Medi-Cal long term nursing home care
- Have Medi-Cal with a Share of Cost and receive IHSS and have met their soc by the 1st day of months 4 or 5 prior to passive enrollment

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## Important CCI/Cal MediConnect Enrollment Terms

- **Excluded** – cannot participate, will not be sent information
- **Exempt** – able to participate, but will not be assigned (passively enrolled) to a plan if they do not voluntarily choose a plan or opt out of Cal MediConnect
- **Opt in** – voluntarily sign up for Cal MediConnect
- **Opt out** – choose to stay with current Medicare coverage

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## Populations Excluded or Exempt from Cal MediConnect

### Major excluded groups

- Persons with ESRD or on a transplant list
- Persons under age 21
- Developmentally disabled in ICF/DD facilities or using the regional centers
- Persons with other health insurance (retiree, EGHP, VA coverage)
- Persons living in VA nursing homes
- Kaiser Medicare Advantage plan members

### Major exempt groups

- Persons in all other Medicare Advantage plans during 2014

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### Medi-Cal Long Term Nursing Home Residents Eligible for Cal MediConnect

- Medi-Cal eligible adults in nursing homes will be eligible for Cal MediConnect
- If they do not make an enrollment decision, the state will assign them to a Cal MediConnect plan
- Continuity of care requirements state that during 2014, Medi-Cal nursing home patients should not be forced to move to a different facility if their Cal MediConnect plan does not contract with the nursing home

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### Cal MediConnect Plan Benefit Package

- All Medicare Part A, B and D benefits
- All Medi-Cal benefits
- Supplemental benefits – vision and transportation services (30 one way health related transportation trips)
- Members have access to Medicare appeal rights for Medicare covered services and Medi-Cal appeal rights for Medi-Cal benefits

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### Populations Excluded from Mandatory Medi-Cal Managed Care

**These major groups are eligible only for Fee For Service Medi-Cal**

- ✓ Under age 21
- ✓ Live in VA nursing home
- ✓ Live in ICF/DD facility
- ✓ Persons with other insurance (retiree, EGHP, VA coverage)
- ✓ PACE enrollees

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### Medi-Cal Benefits Available in Medi-Cal Managed Care

- Community Based Adult Services (CBAS)  
( Medi-Cal adult day health care)
- Hearing aids
- Bathroom aids (grab bars, shower chairs)
- Non-emergency medical transportation  
(wheelchair vans and litter vans)
- Incontinence supplies

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### Transition of Medi-Cal Long Term Supports and Services (LTSS) into Medi-Cal Managed Care

- Medi-Cal long term supports and services (LTSS) are not currently available in Medi-Cal managed care. They are billed to fee for service Medi-Cal.
  - LTSS benefits:
    - In Home Supportive Services (IHSS)
    - Medi-Cal nursing home care
    - Multipurpose Senior Services Program (MSSP)
- 2014 Implementation of the CCI: LTSS benefits are integrated into Medi-Cal managed care and will only be available in a Cal MediConnect plan or a Medi-Cal health plan

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### Medi-Cal Managed Care and In Home Supportive Services (IHSS)

- In 2014, counties will continue to administer IHSS and will determine hours and services
- IHSS consumers will continue to hire, fire and manage their IHSS workers
- Current fair hearing process for IHSS will remain in place

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### Mental Health Transition to Medi-Cal Managed Care

- Medi-Cal mental health services will be coordinated by Medi-Cal Health Plans.
- County administered Medi-Cal specialty mental health services (e.g. intensive day treatment, crisis intervention) and Medi-Cal substance abuse treatment services (e.g. methadone therapy) will be carved out and will not be provided by Medi-Cal Health Plans.

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### CCI Enrollment Options for Medicare and Medi-Cal Are Different

- Enrollment in a Cal MediConnect Medicare/Medicaid plan is **voluntary** and a dual eligible can disenroll on a monthly basis and return to original Medicare
- Dual eligibles who opt out of Cal MediConnect are **required** to enroll into a Medi-Cal health plan. They can change to a different Medi-Cal plan but cannot return to fee for service Medi-Cal

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### Enrollment Options IF YOU HAVE ORIGINAL MEDICARE

#### Option #1: **Enroll into Cal MediConnect**

Enroll your Medicare  
A, B & D + your Medi-Cal benefits  
into a Medicare/Medicaid Plan



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**Enrollment Options**  
**IF YOU HAVE ORIGINAL MEDICARE**

**Option #2: Keep Original Medicare and Enroll into a Medi-Cal Health Plan**

Keep your current Medicare A and B coverage and a Part D plan + Enroll in a Medi-Cal health plan

LA Care or Kaiser, Blue Cross or Care 1<sup>st</sup> (partner plans)      Health Net or Molina (partner plan)

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**Impact of selecting Option #2:**

**You keep your original Medicare**

- Your Medicare benefits are not assigned to a Cal MediConnect plan
- You continue to see your Medicare providers who are paid by Medicare
- You are enrolled in a Medicare Part D drug plan, e.g. SilverScript, Envision Rx.
- Your Medi-Cal benefits are assigned to a Medi-Cal health plan

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**How Will Your Medicare Coordinate with Your Medi-Cal Health Plan?**

- The Medi-Cal health plan provides most of your Medi-Cal benefits.
- Medi-Cal health plans will require prior authorization for most Medi-Cal benefits.
- Your Medicare doctor must work with your Medi-Cal health plan to help you get the Medi-Cal services you need.
- Your Medicare providers must bill the Medi-Cal health plan for your Medicare copayments. The Medicare providers do not need to contract with the Medi-Cal health plan.

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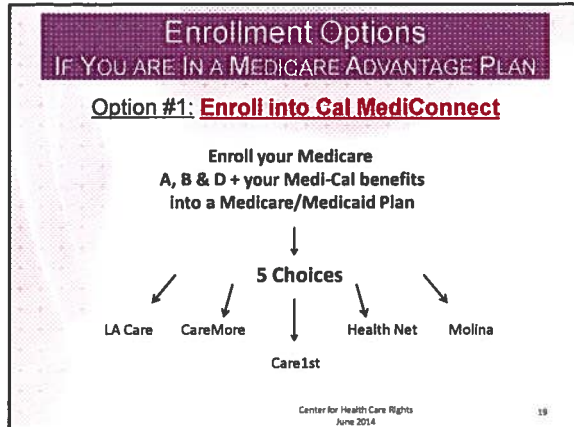
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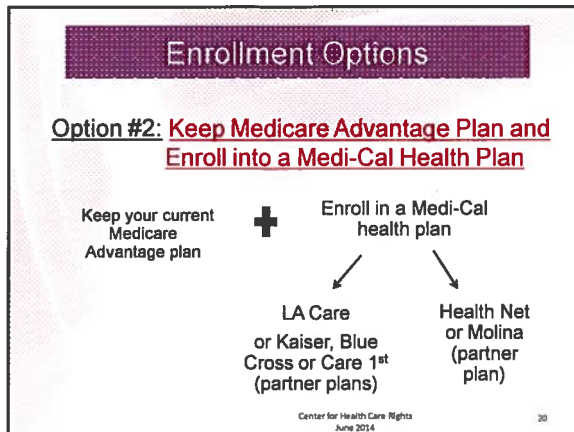
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**Impact of selecting Option #2:**

**Keep your Medicare Advantage (MA) plan  
and join a Medi-Cal health plan**

- Persons in Medicare Advantage plans during 2014 will not be assigned to a Cal MediConnect plan.
- However, they are required to enroll into a Medi-Cal health plan. Passive enrollment into Medi-Cal health plans will start October 2014 primarily by birth month.

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### How Will My Medicare Advantage(MA) Plan Coordinate with My Medi-Cal Health Plan Benefits?

- Your Medi-Cal plan will require prior authorization for the Medi-Cal services you need.
- Your Medicare Advantage doctor will work with your Medi-Cal health plan to help you get the Medi-Cal services you need. Your doctor does not have to contract with your new Medi-Cal plan.

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### PACE - Enrollment Alternative to Cal MediConnect or Mandatory Medi-Cal Managed Care

- PACE is a Medicare/Medicaid program that provides community based services for dual eligibles age 55 and older who are at risk for institutionalization.
- PACE will be a CCI enrollment alternative for dual eligibles who live in zip codes where a PACE program is available.
- Dual eligibles who choose PACE will still need to select a back up Cal MediConnect plan or Medi-Cal health plan in case they do not meet PACE eligibility requirements.

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### Cal MediConnect (CMC) Enrollment Process for LA County

- **April – June 2014: Voluntary enrollment period**  
Dual eligibles can voluntarily enroll only into LA Care or Health Net Cal MediConnect plans
- **July 2014 – June 2015: Passive enrollment into CMC plans**
  - Passive enrollment: Persons eligible for Cal MediConnect who do not enroll into a CMC plan or opt out will be assigned to a CMC plan
  - Most dual eligibles will be passively enrolled into a CMC plan by birthday month

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### LA County CMC Enrollment Process

- **July 2014:** All Dual eligibles in Medi-Cal health plans sponsored by LA Care or Health Net will be passively enrolled into the LA Care or Health Net CMC plans

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### Cal MediConnect Enrollment Notification Process

- Person eligible for Cal MediConnect will receive notices and enrollment information starting 90 days before their targeted enrollment date.
  - 90 days – first notice
  - 60 days – second notice and enrollment materials
  - 30 days – last notice

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### Information on CalMediConnect (CMC) Notices

- **90 day notice**
  - Informs you that there will be changes in your Medicare and Medi-Cal
  - You will have to make an enrollment choice in the future
  - Your choices – 1) enroll into a CMC plan; 2) opt out to keep your Medicare and enroll into a Medi-Cal plan; 3) PACE (only available in some zip codes)

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## Cal MediConnect (CMC) Notices

- **60 day notice**
  - Notice identifies the CMC plan you will be assigned to if you do not chose another CMC plan or opt out of Cal MediConnect
  - Enrollment materials are also sent out and include:
    - Information on the CMC plans in your county
    - The **Health Plan Choice Form**: has two sections, one section to select an alternative CMC plan and a second section to select a Medi-Cal health plan (opt out of Cal MediConnect)

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### Health Plan Choice Form

**1** Check that your name and other information are correct

**2** Skip if it doesn't apply to you

**3** If you want to enroll in a Cal MediConnect Plan, fill in the circle of the plan you want, go to section 4, sign and date, MAIL Form

**4** Fill out the doctor or clinic code you want.

**5** If you want to keep Original Medicare, select a Medi-Cal Health Plan, sign and date, MAIL Form

**6** If you want to change your current health plan, fill reason code

**7** If you want PACE, fill in the circle, but also pick a 2nd option, sign and date, You are DONE.

Sign and date HERE

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## Cal MediConnect (CMC) Enrollment Notification Process

- **30 day notice - Final Notice**
  - Reminds you that you have received your CMC enrollment materials
  - Informs you that unless you make a different enrollment choice, you will be enrolled into a CMC plan – name of plan and date of enrollment is listed
  - States that you have other enrollment choices and can get out of the CMC plan at any time
  - Gives you a deadline date for making a different enrollment choice

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### What Do Consumers Need to Think About When They Get Their Cal MediConnect Enrollment Materials

- 1) Do your doctors participate in any of the plans?
- 2) Which Cal MediConnect plan covers your prescriptions?
- 3) Compare the vision and transportation benefits offered by each Cal MediConnect plan
- 4) Make your enrollment choice by 1) filling out and returning the enrollment form or 2) call Health Care Options at 1-844-580-7272

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### CHCR/HICAP Role in Cal MediConnect Enrollment Counseling

- Help clients understand:
  - The 90, 60 and 30 day notices they receive
  - How to use the enrollment form to enroll into Cal MediConnect or opt out and enroll into a Medi-Cal plan
  - Check Cal MediConnect pharmacy coverage
  - Compare supplemental benefits for vision and transportation

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### Example 1

Mary is Medicare/Medi-Cal eligible. She has ESRD.

- Can Mary enroll into Cal MediConnect ?
- Does she have to enroll into a Medi-Cal health plan?

Mary is excluded from participation in Cal MediConnect because she has ESRD.

Mary is required to enroll into a Medi-Cal health plan.

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### Example 2

Carol is Medicare/Medi-Cal eligible and is a member of a Kaiser Medicare Advantage plan.

- If Carol does not voluntarily enroll into Cal MediConnect will she be passively enrolled?
- Does she have to enroll into a Medi-Cal health plan?

Carol is excluded from enrollment in Cal MediConnect because she is a Kaiser member.

Carol will be required to join a Medi-Cal health plan.

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### Example 3

Bob is Medicare/Medi-Cal eligible and is developmentally disabled/mentally retarded and uses a regional center.

- Is Bob excluded from enrolling into Cal MediConnect?
- Does he have to enroll into a Medi-Cal health plan?

Bob is excluded from enrollment in Cal MediConnect but is required to enroll into a Medi-Cal health plan.

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